



**American  
Red Cross**

Connecticut Blood Services Region

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**Testimony of Dr. Patricia Pisciotto 03-12-2010**

Senator Harris, Representative Ritter and Members of the Public Health Committee, my name is Dr. Patricia Pisciotto and I am Chief Medical Officer for the American Red Cross Blood Services, Northeast Division. I am board certified in the specialties of pediatrics, pediatric hematology/oncology, and blood banking/transfusion medicine. It is a privilege to be here today to talk to you about the Red Cross commitment to donor and patient safety specifically as it relates to the proposal regarding nurses. I do not believe the law should require a nurse be present at every blood drive. This is unwarranted. I also support the proposal of allowing well trained staff to perform apheresis collection procedures regardless of them being an RN or LPN.

The American Red Cross is committed to the principle of safety for both the recipient of a blood transfusion and for the blood donor. One of the missions of the American Red Cross Medical Office is to advocate for patient and donor safety, and I do this every day as a part of my job. The people who come to our blood drives to donate whole blood and apheresis collections are healthy volunteer donors who are thoroughly screened by trained Red Cross staff members before they are allowed to donate. Detailed regulations put forth by both federal and state agencies, as well as professional standards set by organizations such as AABB ensure a careful screening process for each blood donor by expertly trained individuals prior to his or her acceptance as a donor.

The importance we place on the safety of our donors and the care which we use in the screening process is reflected in the fact that almost all of our donors have a good donation experience and

feel good about their altruistic act. We are doing everything we can to make the blood donation process as safe as possible, and we also are prepared, through the training we provide to our staff members, to provide care to those donors who experience a reaction, which are usually of a minor nature. We believe strongly that adequately trained staff must be present at a donation site to recognize and care for these donors. However we do not believe that such individuals must possess either an RN or LPN certification to be appropriately trained and competent to perform these functions. There are no federal regulations or professional standards that require a nurse be present at a blood drive, and such a requirement has not been standard for blood collection sites across the United States. The unique clinical judgment skills necessary for the assessment, care and management of a sick person that are required by an RN or LPN are well beyond what is necessary on a blood drive to care for healthy donors who may have reactions.

I have the deepest admiration and respect for the skills nurses bring to the care of sick patients. However, the majority of reactions that occur at a blood drive are minor events that can be handled by well trained, experienced staff. A Red Cross physician is always available by phone to provide advice for the rare, more serious events that may occur, and in those cases, definitive treatment would always be obtained through a 911 call, regardless of the staff present at a blood drive.

Again, I ask you to eliminate the proposal for a requirement for a nurse on site at every blood drive and support a provision to allow well trained personnel to perform apheresis in healthy blood donors.